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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Applicant : R. F. BARNARD, ET AL.
Serial No. : 10/808,834
Filed : 25 Mar 2004
Examiner : SUSANNA M. MEINECKE DIAZ
Group : 3623
Entitled : System and Method for Project
Designing and Developing a
Procurement and Accounts Payable
System

Docket No. : END919990117US2

Mail Stop AF
Commissioner For Patents
P. O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8

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TRANSMITTAL	1 page
FEE TRANSMITTAL	1 page
SUPPLEMENTAL RESPONSE	3 pages
TERMINAL DISCLAIMER (2 copies)	4 pages

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SHELLEY M BECKSTRAND

Date: 2 Jun 2006

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PTO/SB/21 (09-04)

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

10/808,834

Filing Date

3/25/04

First Named Inventor

R. F. Barnard

Art Unit

3623

Examiner Name

Susanna M. Meinecke Diaz

Attorney Docket Number

END919990117US2

ENCLOSURES (Check all that apply)

- Fee Transmittal Form
 Fee Attached
- Amendment/Reply
 After Final
 Affidavits/declaration(s)
- Extension of Time Request
- Express Abandonment Request
- Information Disclosure Statement
- Certified Copy of Priority Document(s)
- Reply to Missing Parts/ Incomplete Application
 Reply to Missing Parts under 37 CFR 1.52 or 1.53

- Drawing(s)
 Licensing-related Papers
- Petition
 Petition to Convert to a Provisional Application
 Power of Attorney, Revocation
 Change of Correspondence Address
- Terminal Disclaimer
 Request for Refund
 CD, Number of CD(s) _____
 Landscape Table on CD

Remarks

After Allowance Communication to TC

 Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

Proprietary Information

 Status Letter

Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Shelley M Beckstrand, Esq. P.C.

Signature

Printed name

Shelley M Beckstrand

Date

2 Jun 2006

Reg. No.

24,886

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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Shelley M Beckstrand

Date

2 Jun 2006

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Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2006** Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
130.00

Complete If Known

Application Number	10/808,834
Filing Date	3/26/2004
First Named Inventor	R. F. Barnard
Examiner Name	Susanna M. Meinecke Diaz
Art Unit	3623
Attorney Docket No.	END919990117US2

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: **09-0457** Deposit Account Name: **IBM Corporation**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	0	x	= 0

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	0	x	= 0

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50 = 0 (round up to a whole number) x		= 0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Terminal Disclaimer

\$ 130.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 24,886	Telephone 276-238-1972
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Name (Print/Type)	Shelley R. Beckstrand	Date 2 Jun 2006
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This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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